Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 1 of 58

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
SOUTHERN DISTRICT OF OHIO	-	
Case number (if known)	_ Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	■ Chapter 13	Check if this an amended filing

## Official Form 101

## **Voluntary Petition for Individuals Filing for Bankruptcy**

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

t 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name		
Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your	Kyle First name  D Middle name  Post Last name and Suffix (Sr., Jr., II, III)	First name  Middle name  Last name and Suffix (Sr., Jr., II, III)
meeting with the trustee.		
All other names you have used in the last 8 years		
Include your married or maiden names.		
Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-9867	
	Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number	About Debtor 1:  Your full name  Write the name that is on your government-issued picture identification (for example, your driver's license or passport).  Bring your picture identification to your meeting with the trustee.  Post Last name and Suffix (Sr., Jr., II, III)  All other names you have used in the last 8 years Include your married or maiden names.  Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number  About Debtor 1:  Kyle  First name  Post Last name and Suffix (Sr., Jr., II, III)

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 2 of 58

Case number (if known)

Debtor 1 Kyle D Post

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): Any business names and **Employer Identification** Numbers (EIN) you have I have not used any business name or EINs. ☐ I have not used any business name or EINs. used in the last 8 years Include trade names and Business name(s) Business name(s) doing business as names EINs EINs Where you live If Debtor 2 lives at a different address: 504 Winbigler Street Ansonia, OH 45303 Number, Street, City, State & ZIP Code Number, Street, City, State & ZIP Code Darke County County If your mailing address is different from the one If Debtor 2's mailing address is different from yours, fill it above, fill it in here. Note that the court will send any in here. Note that the court will send any notices to this notices to you at this mailing address. mailing address. Number, P.O. Box, Street, City, State & ZIP Code Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing Check one: Check one: this district to file for bankruptcy Over the last 180 days before filing this petition, I Over the last 180 days before filing this petition, have lived in this district longer than in any other I have lived in this district longer than in any district. other district. I have another reason. I have another reason. Explain. (See 28 U.S.C. § 1408.) Explain. (See 28 U.S.C. § 1408.)

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 3 of 58

Case number (if known) Debtor 1 Kyle D Post

ar	t 2: Tell the Court About	Your E	Bankruptcy Ca	se					
E	The chapter of the Bankruptcy Code you are				of each, see Notice Real		342(b) for Individuals Fi	ling for Bankruptcy	
	choosing to file under	☐ Chapter 7							
			Chapter 11						
			Chapter 12						
			Chapter 13						
3.	How you will pay the fee		about how yo	u may pay. Ty attorney is sub	en I file my petition. Ple pically, if you are paying mitting your payment on	the fee yourself, you r	may pay with cash, cash	nier's check, or money	
					stallments. If you choose its (Official Form 103A).	e this option, sign and	attach the Application for	or Individuals to Pay	
			but is not req applies to you	uired to, waive ur family size a	<b>aived</b> (You may request your fee, and may do sond you are unable to pay	only if your income is the fee in installment	s less than 150% of the ots). If you choose this op	official poverty line that tion, you must fill out	
			the Application	on to Have the	Chapter 7 Filing Fee Wa	ived (Official Form 103	3B) and file it with your p	petition.	
Э.	Have you filed for bankruptcy within the	■ N	0.						
	last 8 years?	ПΥ	es.						
			District		When		Case number		
			District		When		Case number		
			District		When		Case number		
10.	Are any bankruptcy	■ N	lo.						
	cases pending or being filed by a spouse who is	_							
	not filing this case with you, or by a business partner, or by an affiliate?	ПΥ	es.						
			Debtor				Relationship to you		
			District		When		Case number, if knowr	 1	
			Debtor				Relationship to you		
			District		When		_ _ Case number, if knowr	1	
11.	Do you rent your	■ N	Go to I	ine 12.					
	residence?	_		ur landlard abt	ained an eviction judgme	ant against you?			
		ПΥ	. ,		, 3	ent against you?			
				No. Go to line					
				Yes. Fill out <i>Ir</i> this bankrupto	nitial Statement About and petition.	Eviction Judgment A	gainst You (Form 101A)	and file it as part of	

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 4 of 58

Debtor 1 Kyle D Post Case number (if known)

Part	Report About Any Bu	sinesses	You Owr	n as a Sole Propriete	or			
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.				
		☐ Yes.	Name	e and location of busi	ness			
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.		Name					
	If you have more than one sole proprietorship, use a separate sheet and attach		Number, Street, City, State & ZIP Code					
	it to this petition.		Chec		to describe your business:			
				☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))				
				Single Asset Real	Estate (as defined in 11 U.S.C. § 101(51B))			
				Stockbroker (as defined in 11 U.S.C. § 101(53A))				
				Commodity Broker	(as defined in 11 U.S.C. § 101(6))			
				None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline	s. If you in	ndicate that you are a low statement, and fe	court must know whether you are a small business debtor so that it can set appropriate a small business debtor, you must attach your most recent balance sheet, statement of ederal income tax return or if any of these documents do not exist, follow the procedure			
	For a definition of small	■ No.	I am i	not filing under Chapt	ter 11.			
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankrup Code.					
		☐ Yes.	I am f	filing under Chapter 1	1 and I am a small business debtor according to the definition in the Bankruptcy Code.			
Pari	t 4: Report if You Own or	Have Any	Hazardo	ous Property or Any	Property That Needs Immediate Attention			
14.	Do you own or have any	■ No.						
	property that poses or is alleged to pose a threat of imminent and identifiable hazard to	☐ Yes.	What is	the hazard?				
	public health or safety? Or do you own any property that needs		If immed	diate attention is				
	immediate attention?		needed.	why is it needed?				
For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?			Where i	s the property?				
	•				Number, Street, City, State & Zip Code			

Debtor 1 Kyle D Post Page 5 of 58 Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

### Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

#### About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

### ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

## About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

## ☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

### ☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

### ☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 6 of 58

Deb	otor 1 Kyle D Post				Case number (if	known)		
Par	t 6: Answer These Quest	ions for Rep	oorting Purposes					
16.	What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) a individual primarily for a personal, family, or household purpose."						
		I	☐ No. Go to line 16b.					
		Ī	Yes. Go to line 17.					
			Are your debts primarily busine money for a business or investme					
		ı	☐ No. Go to line 16c.					
		I	☐ Yes. Go to line 17.					
		16c. S	State the type of debts you owe th	nat are not consu	mer debts or business d	lebts		
17.	Are you filing under Chapter 7?	■ No.	am not filing under Chapter 7. G	o to line 18.				
	Do you estimate that after any exempt	□ Yes. I	am filing under Chapter 7. Do yo are paid that funds will be availab	ou estimate that a le to distribute to	fter any exempt property unsecured creditors?	y is excluded and administrative expenses		
	property is excluded and administrative expenses	ı	□ No					
	are paid that funds will be available for		□ Yes					
	distribution to unsecured creditors?							
18.	How many Creditors do	<b>■</b> 1-49		<b>1</b> ,000-5,000	)	□ 25,001-50,000		
	you estimate that you owe?	☐ 50-99		<b>5001-10,00</b>	0	□ 50,001-100,000		
		<u> </u>		<b>1</b> 0,001-25,0	☐ More than100,000			
		□ 200-999	<del>)</del>					
19.	How much do you	□ \$0 - \$50	0,000	□ \$1,000,001	- \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?		1 - \$100,000	□ \$10,000,001 - \$50 million □ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		□ \$1,000,000,001 - \$10 billion		
			01 - \$500,000 01 - \$1 million			☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		<b>—</b> \$500,00		<b>—</b> \$100,000,00		— More than 900 billion		
20.	How much do you estimate your liabilities	□ \$0 - \$50		☐ \$1,000,001 - \$10 million		□ \$500,000,001 - \$1 billion		
	to be?		1 - \$100,000	□ \$10,000,00°		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion		
			01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million		☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion		
		<b>Δ</b> φοσο,στ			·	·		
Par	t 7: Sign Below							
For	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.						
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.						
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).						
		I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.						
		bankruptcy and 3571.	case can result in fines up to \$2			roperty by fraud in connection with a rs, or both. 18 U.S.C. §§ 152, 1341, 1519,		
		/s/ Kyle D			Signature of Debtor 2			
		Signature			<u> </u>			
		Executed of	on January 22, 2018		Executed on			
			MM / DD / YYYY	DD / YYYY				

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 7 of 58

Debtor 1 Kyle D Post Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Jessica Goldberger	Date	January 22, 2018
Signature of Attorney for Debtor		MM / DD / YYYY
Jessica Goldberger 0081284 Printed name		
Amourgis & Associates Firm name		
3200 W. Market Street, Suite 106 Akron, OH 44333		
Number, Street, City, State & ZIP Code		
Contact phone <b>330-535-6650</b>	Email address	bk_department@amourgis.com
0081284 OH		
Bar number & State		

	17(7(31)))	en Faue o ul po		
nation to identify your	case:			
Kyle D Post				
First Name	Middle Name	Last Name	_	
First Name	Middle Name	Last Name		
nkruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO		
				Check if this is an amended filing
	Kyle D Post First Name First Name	Kyle D Post First Name Middle Name  First Name Middle Name	Representation to identify your case:  Kyle D Post First Name Middle Name Last Name  First Name Middle Name Last Name	Kyle D Post First Name Middle Name Last Name  First Name Middle Name Last Name

## Official Form 106Sum

## Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

		Your a	ssets of what you own
1.	Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	\$	39,100.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	12,635.52
	1c. Copy line 63, Total of all property on Schedule A/B	\$	51,735.52
Pai	t 2: Summarize Your Liabilities		
			iabilities nt you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	86,972.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	36,548.75
	Your total liabilities	\$	123,520.75
Paı	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	1,966.07
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	1,734.00
Pai	4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	ır other sc	hedules.
7.	■ Yes What kind of debt do you have?		

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

page 1 of 2

the court with your other schedules.

Page 9 of 58
Case number (if known) Document

Debtor 1 Kyle D Post

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	\$	4,144.11

Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. <b>Total.</b> Add lines 9a through 9f.	\$	0.00

	Case 3	3:18-bk-30:	183 Doc 1		ed 01/22 :ument		Entered 01/22 se 10 of 58	2/18 14:09	9:17 I	Desc Main
Fill in	this informa	tion to identify	your case and th							
Debto	or 1	Kyle D Post								
<b>3</b> -64-	- 0	First Name	Middle	Name		Last N	ame			
Debto Spouse	or 2 e, if filing)	First Name	Middle	Name		Last N	ame			
Jnited	d States Bank	ruptcy Court for	the: SOUTHER	N DIST	RICT OF OH	IIO				
:ase	number									Chook if this is an
<i></i>										☐ Check if this is an amended filing
Sch each nink it	category, sep fits best. Be a	s complete and a pace is needed,	roperty escribe items. List accurate as possible	e. If two	married peop	le are fil	t fits in more than one ing together, both are i any additional pages,	equally respon	sible for su	
art 1:	<b>-</b>		uilding, Land, or Ot	her Real	Estate You O	wn or H	ave an Interest In			
■ Y	es. Where is th	ne property?		What	is the proper	<b>'ty?</b> Check	x all that apply			
5	504 Winbigl	er Street			Single-family	-		Do not deduc	t secured cla	aims or exemptions. Put
S	Street address, if a	vailable, or other des	cription		Duplex or mo		•			d claims on Schedule D: ns Secured by Property.
,	Ansonia	ОН	45303-0000		Manufacture Land	d or mob	ile home	Current value entire proper		Current value of the portion you own?
C	City	State	ZIP Code			oroperty		\$78	,200.00	\$39,100.00
				U Who			property? Check one		simple, ten , if known.	our ownership interest ancy by the entireties, or
_	Darke				Debtor 2 only					
C	County				Debtor 1 and		2 only otors and another			nmunity property
						you wish	to add about this iten	(see instru	,	
	dd the dollar	value of the no	ortion volucion fo	r all of	VOUR Antries	from P	art 1, including any	entries for		
							g arry		>	\$39,100.00

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Part 2: Describe Your Vehicles

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Page 11 of 58
Case number (if known) Document Debtor 1 **Kyle D Post** 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles Yes Do not deduct secured claims or exemptions. Put Ford Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: F150 Creditors Who Have Claims Secured by Property. Model: Debtor 1 only 2010 Year: Debtor 2 only Current value of the Current value of the Approximate mileage: 110000 Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another Supercab XL \$6,059.00 \$6,059.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories □ No Yes Who has an interest in the property? Check one Make: **Dutchman** Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Camper ■ Debtor 1 only Model: Creditors Who Have Claims Secured by Property. Year: 1992 Debtor 2 only Current value of the Current value of the entire property? portion you own? Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another 28F - purchased for \$100 in ☐ Check if this is community property \$100.00 \$100.00 (see instructions) 2017 Who has an interest in the property? Check one 4.2 Make: Starcraft Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Seafarer ■ Debtor 1 only Model: Creditors Who Have Claims Secured by Property. 1972 Year: Debtor 2 only Current value of the Current value of the entire property? portion you own? ☐ Debtor 1 and Debtor 2 only Other information: At least one of the debtors and another \$100.00 Boat and trailer - paid \$100 for ☐ Check if this is community property \$100.00 (see instructions) both in 2016 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$6,259.00 pages you have attached for Part 2. Write that number here......>> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware Π Nο Yes. Describe.....

Bed, dresser, tv, couch, playstation, phone, washer and dryer, miscellaneous tools, fridge, gun safe (guns do not belong to debtor), miscellaneous household goods - no one item worth more than \$500

\$1,500.00

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Page 12 of 58
Case number (if known) Document Debtor 1 **Kyle D Post** 7 Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No ☐ Yes. Describe..... 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No ☐ Yes. Describe..... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment No ☐ Yes. Describe..... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No Yes. Describe..... **Used clothes** \$100.00 Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No Yes. Describe..... \$150.00 2 earrings 13. Non-farm animals Examples: Dogs, cats, birds, horses Yes. Describe..... 2 dogs, 1 ferret, 1 cat \$0.00 14. Any other personal and household items you did not already list, including any health aids you did not list No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$1,750.00 for Part 3. Write that number here ..... Part 4: Describe Your Financial Assets

Do you own or have any legal or equitable interest in any of the following?

Current value of the portion you own? Do not deduct secured claims or exemptions.

16. Cash

Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

		Case 3:18-bl	<-30183		Filed 01/22 Document	/18 E	ntered 01/22/18 14:09:: 13 of 58	17 Desc Main
De	ebtor 1	Kyle D Post			Doddinent	- age	13 of 58 Case number (if known	ı)
	☐ Yes	s						
	Exan				counts; certificates		shares in credit unions, brokeragest each.	e houses, and other similar
	□ No ■ Yes	S			Institution	name:		
			17.1. <b>Ch</b> e	ecking	Mercer S	Savings		\$679.58
18.		s, mutual funds, o			orokerage firms, mo	oney marke	t accounts	
		S	Institu	ution or issue	er name:			
	joint ■ No	oublicly traded stoventure  Give specific info				corporated	I businesses, including an intere	est in an LLC, partnership, and
			Name of	entity:			% of ownership:	
	Nego Non- ■ No		nclude persor ents are those	nal checks, c you cannot t them	ashiers' checks, pr	omissory n	instruments otes, and money orders. g or delivering them.	
	<i>Exan</i> □ No		RA, ERISA, Ke	eogh, 401(k),	, 403(b), thrift savin	igs account	s, or other pension or profit-sharing	g plans
	- Yes	s. List each account	Type of acc	ount:	Institution	name:		
			IRA		America	n Funds		\$2,711.62
22.	Your Exan		l deposits you				ice or use from a company water), telecommunications compa	anies, or others
	■ No □ Yes	s			Institution	name or in	dividual:	
23.	Annu ■ No	ities (A contract for	a periodic pa	yment of mo	ney to you, either fo	or life or for	a number of years)	
		slss	uer name and	description.				
24.		sts in an education S.C. §§ 530(b)(1), 5			qualified ABLE p	rogram, or	under a qualified state tuition p	rogram.
		Ins	titution name	and descripti	ion. Separately file	the records	s of any interests.11 U.S.C. § 521(c	<b>&gt;)</b> :
25.	Trust ■ No	s, equitable or fut	ure interests	in property	(other than anythi	ing listed i	n line 1), and rights or powers ex	xercisable for your benefit
		s. Give specific info	rmation about	t them				
26.		nts, copyrights, tra nples: Internet doma						

 $\hfill \square$  Yes. Give specific information about them...

Page 14 of 58
Case number (if known) Document **Kyle D Post** Debtor 1 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ■ No ☐ Yes. Give specific information about them, including whether you already filed the returns and the tax years...... 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ■ No ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: Western and Southern Life Insurance \$1,235.32 Company 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. Nο ☐ Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ Yes. Describe each claim....... 35. Any financial assets you did not already list ■ No ☐ Yes. Give specific information.. 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$4,626.52 for Part 4. Write that number here..... Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Schedule A/B: Property

No. Go to Part 6.
Official Form 106A/B

37. Do you own or have any legal or equitable interest in any business-related property?

Case 3:18-bk-30183

Doc 1

Filed 01/22/18

Entered 01/22/18 14:09:17

page 5

		Filed 01/22/18	Entered	1 01/22/18 14:09:17	Desc Main
Debto	or 1 Kyle D Post	ocument Pa	ige 15 oi	58 Case number (if known)	
	/es. Go to line 38.				
Part 6	Describe Any Farm- and Commercial Fishing-Relate If you own or have an interest in farmland, list it in Part		Have an Interes	st In.	
_	o you own or have any legal or equitable interes	t in any farm- or com	mercial fishir	ng-related property?	
	No. Go to Part 7.				
	Yes. Go to line 47.				
Part 7	Describe All Property You Own or Have an Inte	rest in That You Did Not	List Above		
	o you have other property of any kind you did no Examples: Season tickets, country club membership				
	No				
	Yes. Give specific information				
_	Too. Cive opeoine illioring deciment.				
54.	Add the dollar value of all of your entries from P	art 7. Write that numb	er here		\$0.00
Part 8	List the Totals of Each Part of this Form				
55	Part 1: Total real estate, line 2				\$39,100.00
	Part 2: Total vehicles, line 5		\$6,259.00		Ψ00,100.00
57. I	Part 3: Total personal and household items, line	15	\$1,750.00		
58. I	Part 4: Total financial assets, line 36		\$4,626.52		
59. I	Part 5: Total business-related property, line 45		\$0.00		
60. I	Part 6: Total farm- and fishing-related property, I	line 52	\$0.00		
61. I	Part 7: Total other property not listed, line 54	+	\$0.00		
62.	Total personal property. Add lines 56 through 61		512,635.52	Copy personal property total	\$12,635.52
63.	Total of all property on Schedule A/B. Add line 55	5 + line 62			\$51,735.52

Official Form 106A/B Schedule A/B: Property page 6

Fill in this infor	mation to identify your	case:		
Debtor 1	Kyle D Post			
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO	
Case number				
(if known)				

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
  - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
  - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Schedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
504 Winbigler Street Ansonia, OH 45303 Darke County	\$39,100.00		\$2,567.50	Ohio Rev. Code Ann. § 2329.66(A)(1)
Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	2020:00(/)(/)
1992 Dutchman Camper 28F - purchased for \$100 in 2017	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(2)
Line from Schedule A/B: 4.1			100% of fair market value, up to any applicable statutory limit	2323.00(A)(2)
1972 Starcraft Seafarer Boat and trailer - paid \$100 for both	\$100.00		\$14.68	Ohio Rev. Code Ann. § 2329.66(A)(18)
in 2016 Line from Schedule A/B: 4.2			100% of fair market value, up to any applicable statutory limit	2020.00(A)(10)
Bed, dresser, tv, couch, playstation, phone, washer and dryer,	\$1,500.00		\$1,500.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)
miscellaneous tools, fridge, gun safe (guns do not belong to debtor), miscellaneous household goods - no one item worth more than \$500			100% of fair market value, up to any applicable statutory limit	2020.00(A)(Ψ)(α)

Debto	or 1 Kyle D Post		Boodinent	Case number (if known)			
	Brief description of the property and line on Schedule A/B that lists this property		Current value of the Amount of the exemption you claim portion you own			Specific laws that allow exemption	
			Copy the value from Schedule A/B	Che	eck only one box for each exemption.		
_	Jsed clothes ine from <i>Schedule A/B</i> : <b>11</b> .	.1	\$100.00		\$100.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(a)	
_					100% of fair market value, up to any applicable statutory limit		
	earrings ine from Schedule A/B: 12	1	\$150.00		\$150.00	Ohio Rev. Code Ann. § 2329.66(A)(4)(b)	
_	ine nom Schedule A/D. 12	· <b>'</b>			100% of fair market value, up to any applicable statutory limit	2020.00(17)(4)(8)	
	Checking: Mercer Savir	-	\$679.58		\$475.00	Ohio Rev. Code Ann. § 2329.66(A)(3)	
_	ine nom schedule A/D. 11	. 1			100% of fair market value, up to any applicable statutory limit	2020.00(A)(0)	
	Checking: Mercer Savir	cking: Mercer Savings			\$204.58	Ohio Rev. Code Ann. § 2329.66(A)(13)	
	ille Holli Schedule A/D. 11			100% of fair market value, up to any applicable statutory limit	2020.00(17)(10)		
	RA: American Funds ine from Schedule A/B: 21	52.711.0			\$2,711.62	Ohio Rev. Code Ann. § 2329.66(A)(10)(c)	
_	ine nom denedale A/D. 21	· <b>'</b>			100% of fair market value, up to any applicable statutory limit	2020.00(A)(10)(0)	
-	Vestern and Southern Company	Life Insurance	\$1,235.32		\$1,235.32	Ohio Rev. Code Ann. § 2329.66(A)(18)	
	ine from Schedule A/B: 31	.1			100% of fair market value, up to any applicable statutory limit	2020100(1.1)(1.0)	
	are you claiming a homes Subject to adjustment on 4/				led on or after the date of adjustmer	nt.)	
	No						
	Yes. Did you acquire th	e property covere	ed by the exemption wi	ithin 1	,215 days before you filed this case	?	
	□ No						
	☐ Yes						

	Document	Page 18 c	of 58		
Fill in this information to identify y	our case:				
Debtor 1 Kyle D Post					
First Name	Middle Name	Last Name			
Debtor 2 (Spouse if, filing) First Name	Middle Name	Last Name			
United States Bankruptcy Court for the	ne: SOUTHERN DISTRICT OF OHIC	)			
Case number					
(if known)				_	if this is an ded filing
Official Form 106D					
	rs Who Have Claims S	ecured	by Propert	У	12/15
	e. If two married people are filing together, it out, number the entries, and attach it to				
1. Do any creditors have claims secured	by your property?				
☐ No. Check this box and submi	it this form to the court with your other so	chedules. You	have nothing else t	o report on this form.	
Yes. Fill in all of the information	on below.				
Part 1: List All Secured Claims					
for each claim. If more than one creditor h	as more than one secured claim, list the credit nas a particular claim, list the other creditors in etical order according to the creditor's name.		Column A  Amount of claim  Do not deduct the value of collateral.	Column B  Value of collateral that supports this claim	Column C Unsecured portion If any
2.1 Caliber Home Loans, In	Describe the property that secures the	e claim:	\$73,065.00	\$78,200.00	\$0.00
Creditor's Name	504 Winbigler Street Ansonia, 45303 Darke County	ОН			
13801 Wireless Way Oklahoma City, OK 73134	As of the date you file, the claim is: Chapply.  Contingent	eck all that			
Number, Street, City, State & Zip Code	Unliquidated				
Who owes the debt? Check one.	☐ Disputed  Nature of lien. Check all that apply.				
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mo car loan)	ortgage or secure	ed		
Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	anic's lien)			
At least one of the debtors and anothe					
☐ Check if this claim relates to a community debt	☐ Other (including a right to offset)				
Opened 03/16 Last Active	t.				
Date debt was incurred 10/11/17	Last 4 digits of account number	or 0330			
2.2 Greenvii Nti	Describe the property that secures the	e claim:	\$13,907.00	\$6,059.00	\$7,848.00
Creditor's Name	2010 Ford F150 110000 miles Supercab XL				
Po Box 190 Greenville, OH 45331	As of the date you file, the claim is: Chapply.	eck all that			
Number, Street, City, State & Zip Code	☐ Unliquidated☐ Disputed				
Who owes the debt? Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only □ Debtor 2 only	An agreement you made (such as mo car loan)	ortgage or secure	ed		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mecha	anic's lien)			
☐ At least one of the debtors and anothe	_	•			

# Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 19 of 58

Debtor 1 Kyle D Po	st		(	Case number ( <sub>if know</sub> )	
First Name	Middle Na	me Last Name		_	
☐ Check if this claim recommunity debt	elates to a	Other (including a right to offset)			
Date debt was incurred	Opened 07/14 Last Active 11/10/17	Last 4 digits of account number	3286		
	•	olumn A on this page. Write that number	here:	\$86,972.00	
If this is the last page Write that number her	•	he dollar value totals from all pages.		\$86,972.00	

## Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

			Document	t Page 20 of	58	-		
Filli	n this informa	ation to identify your	case:					
Debt	or 1	Kyle D Post				1		
		First Name	Middle Name	Last Name				
Debt	or 2 se if, filing)	First Name	Middle Name	Last Name				
Unite	ed States Bank	cruptcy Court for the:	SOUTHERN DISTRICT O	F OHIO				
Case	number							
(if kno	wn)							
						İ	amended fili	ng
Offic	cial Form	106F/F						
			ho Have Unsecur	ed Claims			1:	2/15
iched iched eft. A ame	lule G: Executo lule D: Creditors ttach the Contir and case numb	ry Contracts and Unexp s Who Have Claims Sec nuation Page to this pag per (if known).	that could result in a claim. A ired Leases (Official Form 106 ured by Property. If more spac e. If you have no information t	G). Do not include any cr ce is needed, copy the Pa	editors with partially s	secured clai number the	ims that are list e entries in the l	ted in boxes on the
Part		of Your PRIORITY Un						
_	_ ′	s have priority unsecure	d claims against you?					
	☐ No. Go to Par ☐	t 2.						
	Yes.	-114	s. If a creditor has more than one		li - t th lit t		alain Faranah	alaina Kataul
P	art 1. If more that	an one creditor holds a pa	er according to the creditor's namer ricular claim, list the other credit see the instructions for this form it	tors in Part 3.	Total claim	Priority amount		priority
2.1	Jessica J	lenkins	Last 4 digits of ac	ccount number	\$0.00		\$0.00	\$0.00
	Priority Cred		Wilhon was the do	.ht in account of 2				
	103 Dwye	er Ave e, OH 45331	When was the de	ept incurred?		-		
		eet City State Zlp Code	As of the date yo	u file, the claim is: Check	all that apply			
	Who incurred t	he debt? Check one.	☐ Contingent					
	Debtor 1 onl	у	☐ Unliquidated					
	Debtor 2 only	у	☐ Disputed					
	Debtor 1 and	d Debtor 2 only	Type of PRIORITY	Y unsecured claim:				
	☐ At least one	of the debtors and anothe	Domestic supp	ort obligations				
	☐ Check if this	s claim is for a commur	nity debt	tain other debts you owe the	e government			
	Is the claim sul	bject to offset?	☐ Claims for deat	th or personal injury while y	ou were intoxicated			
	No		☐ Other. Specify					
	☐ Yes			\$117.39 weekly ch	ild support; no a	rrears		
Part	2: List All	of Your NONPRIORIT	Y Unsecured Claims					
3. C	o any creditors	s have nonpriority unsec	ured claims against you?					
	☐ No. You have	nothing to report in this p	art. Submit this form to the court	with your other schedules.				
	Yes.	- , - ''						
4. L	ist all of your n	onpriority unsecured cl	aims in the alphabetical order	of the creditor who holds	s each claim. If a credit	or has more	than one nonpr	iority
u	nsecured claim,	list the creditor separately	for each claim. For each claim	listed, identify what type of	claim it is. Do not list cl	aims already	y included in Par	t 1. If more

Total claim

Part 2.

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 21 of 58

Evergreen Bank Group	Last 4 digits of account number		\$5,474.35
Nonpriority Creditor's Name 1776 Lincoln St Ste 900 Denver, CO 80203	When was the debt incurred?		
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify		
Freedom Road Financial	Last 4 digits of account number	5001	\$5,474.00
Nonpriority Creditor's Name  10509 Professional Cir S Reno, NV 89521	When was the debt incurred?	Opened 10/14 Last Active 12/27/16	
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
Debtor 1 only	☐ Contingent		
☐ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community		aration agreement or divorce that you did not	
Is the claim subject to offset?  ■ No	report as priority claims  Debts to pension or profit-sharing	a plane, and other similar debts	
■ No □ Yes	Other. Specify Traded-in 2		
Harloy Davidson Einanaial	Last 4 digits of account number	2531	¢6 247 00
Harley Davidson Financial Nonpriority Creditor's Name Attention: Bankruptcy	Last 4 digits of account number	Opened 05/15 Last Active	\$6,347.00
Po Box 22048	When was the debt incurred?	11/17/17	
Carson City, NV 89721			
Number Street City State Zlp Code  Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only		
At least one of the debtors and another			
☐ Check if this claim is for a community debt	Student loans	aration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	nation agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	■ Other. Specify Repossess	ed Harley	

Document Page 22 of 58 Debtor 1 Kyle D Post Case number (if know) 4.4 \$9,450.60 Midwest America Fed Cu Last 4 digits of account number 0001 Nonpriority Creditor's Name Opened 11/15 Last Active 1104 Medical Park Dr When was the debt incurred? 6/06/17 Fort Wayne, IN 46825 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. Debtor 1 only ☐ Contingent Debtor 2 only □ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt ☐ Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Yes Repossessed 2016 Skido Other. Specify **Recovery and Wellness Centers of** \$5,321.80 4.5 **Midwest** Last 4 digits of account number Nonpriority Creditor's Name 600 Walnut St When was the debt incurred? Greenville, OH 45331 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No  $\hfill\square$  Debts to pension or profit-sharing plans, and other similar debts Medical debt ☐ Yes Other. Specify 4.6 Synchrony Bank/Lowes Last 4 digits of account number 4896 \$2,723.00 Nonpriority Creditor's Name Attn: Bankruptcy Opened 07/15 Last Active Po Box 965060 When was the debt incurred? 11/22/17 Orlando, FL 32896 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent Debtor 2 only ■ Unliquidated

Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community debt  $\hfill\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims  $\square$  Debts to pension or profit-sharing plans, and other similar debts ■ No ■ Other. Specify Charge Account ☐ Yes

Entered 01/22/18 14:09:17 Desc Main Case 3:18-bk-30183 Doc 1 Filed 01/22/18

Document Page 23 of 58 Debtor 1 Kyle D Post ase number (if know) 4.7 US Bank/Rms CC Last 4 digits of account number 6391 \$1,758.00 Nonpriority Creditor's Name **Card Member Services** Opened 08/15 Last Active Po Box 108 When was the debt incurred? 11/14/17 St Louis, MO 63166 Number Street City State Zlp Code As of the date you file, the claim is: Check all that apply Who incurred the debt? Check one. ■ Debtor 1 only ☐ Contingent ☐ Unliquidated Debtor 2 only Debtor 1 and Debtor 2 only ☐ Disputed Type of NONPRIORITY unsecured claim: ☐ At least one of the debtors and another ☐ Student loans ☐ Check if this claim is for a community  $\square$  Obligations arising out of a separation agreement or divorce that you did not Is the claim subject to offset? report as priority claims ■ No ☐ Debts to pension or profit-sharing plans, and other similar debts ■ Other. Specify Credit Card ☐ Yes Part 3: List Others to Be Notified About a Debt That You Already Listed 5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? **Ohio Child Support Payment Central** Line 2.1 of (Check one): Part 1: Creditors with Priority Unsecured Claims PO Box 182372 ☐ Part 2: Creditors with Nonpriority Unsecured Claims Columbus, OH 43218-2372 Last 4 digits of account number Name and Address On which entry in Part 1 or Part 2 did you list the original creditor? Rick L Sprunger Line **4.4** of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims 1540 Shady Oak Dr ■ Part 2: Creditors with Nonpriority Unsecured Claims Berne, IN 46711 Last 4 digits of account number On which entry in Part 1 or Part 2 did you list the original creditor? Name and Address Tricia N. McKinnon, Esq. Line 4.1 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims P.O. Box 5016 Part 2: Creditors with Nonpriority Unsecured Claims Rochester, MI 48308 Last 4 digits of account number Part 4: Add the Amounts for Each Type of Unsecured Claim 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total Claim** 6a. **Domestic support obligations** 6a. 0.00 Total claims from Part 1 Taxes and certain other debts you owe the government 6b. 6b. 0.00 Claims for death or personal injury while you were intoxicated 6c. 6c. 0.00 6d Other. Add all other priority unsecured claims. Write that amount here. 6d 0.00 Total Priority. Add lines 6a through 6d. 6e. \$ 0.00 **Total Claim** 

Total
claims
from Part 2

6f.	Student loans	6f.	\$ 0.00
6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
6i.	Other. Add all other nonpriority unsecured claims. Write that amount	6i.	\$ 36,548.75

here

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Page 24 of 58 Case number (if know) Document

Debtor 1 Kyle D Post

Total Nonpriority. Add lines 6f through 6i.

6j. \$ 36,548.75

Fill in this information to identify your case:						
Debtor 1	Kyle D Post					
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States Ba	ankruptcy Court for the:	SOUTHERN DISTRICT	OF OHIO			
Case number						
(if known)						

## Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with	n whom you have the er, Street, City, State and ZIP C	contract or lease	State what the contract or lease is for
2.1					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			_
	City		State	ZIP Code	
2.3					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.4					
	Name				_
	Number	Street			_
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	_
	•				

		Documen	t Page 26 of	58	
Fill in this in	formation to identify your	case:			
Debtor 1	Kyle D Post				
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	SOUTHERN DISTRICT O	F OHIO		
Case number	·				☐ Check if this is an amended filing
	orm 106H le H: Your Cod	lebtors			12/15
people are fil ill it out, and our name ar	ing together, both are equently number the entries in the case number (if known	are also liable for any debts ually responsible for supply boxes on the left. Attach to ). Answer every question.	ring correct informatio he Additional Page to	on. If more space is neede this page. On the top of a	d, copy the Additional Page,
_	a nave any ecocionen (ii	you are ming a joint odoc, do	That hat chinal apouse u	s a codesion.	
□ No					
Yes					
		u lived in a community prop , Nevada, New Mexico, Puer			es and territories include
_	o to line 3. Did your spouse, former spo	use, or legal equivalent live v	vith you at the time?		
in line 2	again as a codebtor only 6D), Schedule E/F (Officia	if that person is a guaranto	r or cosigner. Make su	ure you have listed the cre	n you. List the person shown editor on Schedule D (Official dule E/F, or Schedule G to fill
	lumn 1: Your codebtor ne, Number, Street, City, State and 2	ZIP Code		Column 2: The creditor Check all schedules tha	to whom you owe the debt t apply:
50	resa Post 4 Winbigler Street sonia, OH 45303			■ Schedule D, line _ □ Schedule E/F, line □ Schedule G Caliber Home Loans	

# 

Fill	in this information to identify your	case:								
Del	otor 1 Kyle D Pos	st								
	otor 2 ouse, if filing)				_					
Uni	ted States Bankruptcy Court for t	ne: SOUTHERN DISTRIC	CT OF OHIO							
	se number 		-			☐ A su	amended t upplement	showing	g postpetition llowing date:	chapter
0	fficial Form 106I					MM	/ DD/ YY	YY		
S	chedule I: Your Inc	come					,			12/15
sup spo atta	as complete and accurate as popularing correct information. If you are separated and you have a separate sheet to this form  Describe Employment	u are married and not filit our spouse is not filing w n. On the top of any additi	ng jointly, and your sith you, do not include	spouse i de infor	is liv matic	ing with yo on about yo	ou, includ our spous	e inform se. If mo	ation about re space is i	your needed,
1.	Fill in your employment information.		Debtor 1			D	ebtor 2 o	r non-fil	ing spouse	
	If you have more than one job, attach a separate page with	Employment status	<ul><li>■ Employed</li><li>□ Not employed</li></ul>				☐ Employe ☐ Not emp			
	information about additional employers.	Occupation	Welder					, , , ,		
	Include part-time, seasonal, or self-employed work.	Employer's name	Dynamic Weld (	Corpora	atior	n				
	Occupation may include studen or homemaker, if it applies.	t Employer's address	242 North St Osgood, OH 453	351						
		How long employed t	here? 5 years							
Par	t 2: Give Details About M	onthly Income								
	mate monthly income as of the use unless you are separated.	date you file this form. If	you have nothing to re	eport for	any l	line, write \$6	0 in the sp	ace. Inc	lude your nor	n-filing
	u or your non-filing spouse have e space, attach a separate sheet		ombine the information	n for all e	emplo	oyers for tha	at person	on the lin	nes below. If y	ou need
						For Debto		For Deb	otor 2 or ng spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly	•		2.	\$	3,54	49.17	\$	N/A	
3.	Estimate and list monthly over	rtime pay.		3.	+\$		0.00	+\$	N/A	

3,549.17

\$

N/A

Calculate gross Income. Add line 2 + line 3.

Debto	r 1	Kyle D Post	-	C	ase i	number ( <i>if kno</i>	own)				
						Debtor 1		non-	Debtor filing s	pouse	
	Cop	by line 4 here	4.		\$	3,549.	17	\$		N/A	<u>.                                    </u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	١.	\$	912.	56	\$		N/A	
	5b.	Mandatory contributions for retirement plans	5b	).	\$	0.	00	\$		N/A	<u> </u>
	5c.	Voluntary contributions for retirement plans	5c	<b>:</b> .	\$	106.	47	\$		N/A	<u> </u>
	5d.	Required repayments of retirement fund loans	5d		\$_		00	\$		N/A	_
	5e.	Insurance	5e		\$	55.		\$		N/A	_
	5f.	Domestic support obligations	5f.		\$_	508.		\$		N/A	_
	5g. 5h.	Union dues Other deductions. Specify:	5g 5h		\$_ \$		00	+ \$		N/A N/A	_
		· · · · · · · · · · · · · · · · · · ·	_		. —			· · ·			_
		I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,583.		\$		N/A	_
7.	Cal	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$	1,966.	07	\$		N/A	<u>.</u>
	List 8a.	all other income regularly received:  Net income from rental property and from operating a business, profession, or farm  Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a		\$	0	00	\$		N/A	
	8b.	Interest and dividends	8b		<sub>\$</sub> —		00	\$ 		N/A	_
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c		\$ \$		.00	\$ \$		N/A	_
	8d.	Unemployment compensation	8d		<u>*</u> —		00	\$		N/A	_
	8e.	Social Security	8e	<b>.</b>	\$		00	\$		N/A	_
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:  Pension or retirement income	_ 8f. 8g		\$		00	\$ 		N/A N/A	_
	8h.	Other monthly income. Specify:	8h		\$		00	+ \$		N/A	_
9.	Add	l all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	i	0.	00	\$		N/	A
10	Cal	culate monthly income. Add line 7 + line 9.	10.	\$		1,966.07	+ \$		N/A	= \$	1,966.07
		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.		Ψ_		1,300.07	`  * -		11//	<sub> </sub>	1,300.07
11.	Stat Incli othe Do i	te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives.  not include any amounts already included in lines 2-10 or amounts that are not a cify:	depe							<i>∃ J.</i> +\$	0.00
		I the amount in the last column of line 10 to the amount in line 11. The resident that amount on the Summary of Schedules and Statistical Summary of Certain lies							12.	\$	1,966.07
13.	Do :	you expect an increase or decrease within the year after you file this form' No.	?							Combi month	ned ly income

Official Form 106I Schedule I: Your Income page 2

Fill	in this informa	tion to identify yo	our case:							
Deb		Kyle D Post				Ched	ck if this is:			
	tor 2 buse, if filing)					<ul> <li>☐ An amended filing</li> <li>☐ A supplement showing postpetition chapter</li> <li>13 expenses as of the following date:</li> </ul>				
` '		untoy Court for the	· SOUTH	IERN DISTRICT OF OHIO	ı	_	MM / DD / YYYY			
		upicy Court for the	. 30011	ILINI DIGITALET OF OTHE	<u></u>		WIWI / DD / TTTT			
	e number nown)									
		rm 106J								
		J: Your						12/1		
info	rmation. If m	and accurate as ore space is ne n). Answer eve	eded, atta	. If two married people ar ch another sheet to this n.	e filing together, be form. On the top of	oth are equ f any addition	ally responsible fo onal pages, write y	or supplying correct your name and case		
Part		ibe Your House	hold							
1.	Is this a join									
	■ No. Go to		in a separ	ate household?						
	N									
			st file Offici	al Form 106J-2, <i>Expenses</i>	for Separate House	ehold of Deb	tor 2.			
2.	Do you have	e dependents?	■ No							
	Do not list Do Debtor 2.	ebtor 1 and	☐ Yes.	Fill out this information for each dependent	Dependent's relati		Dependent's age	Does dependent live with you?		
	Do not state							□ No		
	dependents	names.						□ Yes		
								□ No □ Yes		
								□ No		
								☐ Yes		
								□ No		
_	_							☐ Yes		
3.		enses include f people other t	han	No						
		d your depende		Yes						
Part		ate Your Ongoi								
exp				uptcy filing date unless y y is filed. If this is a supp						
the	value of sucl	n assistance an		government assistance i cluded it on <i>Schedule I:</i> \			Your exp	enses		
(On	icial Form 10	oi.)					Tour exp			
4.		r home owners ad any rent for th		ses for your residence. I r lot.	nclude first mortgage	e 4. \$		264.00		
	If not includ	ed in line 4:								
	4a. Real e	state taxes				4a. \$		0.00		
	•	rty, homeowner's				4b. \$		0.00		
				ıpkeep expenses		4c. \$		75.00		
5.		owner's associat		dominium dues <b>our residence,</b> such as ho	me equity loans	4d. \$ 5. \$		0.00		
٥.	aaondi i	gago payiii			mo oquity idanis	υ. ψ		0.00		

# Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 30 of 58

Debtor 1	Kyle D Post		Case num	ber (if known)	
6. <b>Util</b>	ities:				
6a.	Electricity, heat, natural gas		6a.	\$	180.00
6b.	Water, sewer, garbage collection	on	6b.	\$	65.00
6c.	Telephone, cell phone, Interne	t, satellite, and cable services	6c.	\$	100.00
6d.	Other. Specify:		6d.	\$	0.00
. Foo	d and housekeeping supplies		7.	\$	300.00
. Chi	Idcare and children's education	ı costs	8.	\$	0.00
Clo	thing, laundry, and dry cleaning	3	9.	\$	50.00
	sonal care products and servic		10.	\$	50.00
	dical and dental expenses		11.	\$	80.00
	nsportation. Include gas, mainte	nance, bus or train fare.		*	
	not include car payments.	nancs, suc or namialor	12.	\$	350.00
		newspapers, magazines, and books	13.	\$	50.00
. Cha	aritable contributions and religi	ous donations	14.	\$	0.00
. Ins	urance.				
Do	not include insurance deducted fr	om your pay or included in lines 4 or 20.			
15a	. Life insurance		15a.	\$	20.00
15b	. Health insurance		15b.	\$	0.00
15c	. Vehicle insurance		15c.	\$	90.00
15d	. Other insurance. Specify:		15d.	\$	0.00
. Tax	es. Do not include taxes deducte	d from your pay or included in lines 4 or 20	).		_
Spe	cify:		16.	\$	0.00
	allment or lease payments:				
17a	. Car payments for Vehicle 1		17a.	\$	0.00
17b	. Car payments for Vehicle 2		17b.	\$	0.00
17c	. Other. Specify:		17c.	\$	0.00
17d	. Other. Specify:		17d.	\$	0.00
3. <b>Yo</b> ı	ir payments of alimony, mainte	nance, and support that you did not rep	ort as		
		Schedule I, Your Income (Official Form	<b>106I).</b> 18.	·	0.00
). <b>O</b> th	er payments you make to supp	ort others who do not live with you.		\$	0.00
	cify:		19.		
		ncluded in lines 4 or 5 of this form or or			
	. Mortgages on other property		20a.		0.00
	. Real estate taxes		20b.	·	0.00
20c	. Property, homeowner's, or ren	ter's insurance	20c.		0.00
20d	<ul> <li>Maintenance, repair, and upke</li> </ul>	ep expenses	20d.	\$	0.00
20e	. Homeowner's association or co	ondominium dues	20e.	\$	0.00
. Oth	er: Specify: Pet expenses		21.	+\$	60.00
2. Cal	culate your monthly expenses				
	. Add lines 4 through 21.			\$	1,734.00
	ğ .	s for Debtor 2), if any, from Official Form 10	)6.J-2	\$	1,104.00
	. Add line 22a and 22b. The resu			\$	4 724 00
220	. Add litte 22a attu 22b. Title lesu	it is your monthly expenses.		φ	1,734.00
3. Cal	culate your monthly net income	<b>).</b>		,	
23a	. Copy line 12 (your combined n	nonthly income) from Schedule I.	23a.	\$	1,966.07
23b	. Copy your monthly expenses f	rom line 22c above.	23b.	-\$	1,734.00
					·
230	. Subtract your monthly expense	es from your monthly income.			000.07
	The result is your monthly net	income.	23c.	\$	232.07
		ease in your expenses within the year a			or doorooo !
			ect your mortgage	payment to increa	ise of decrease decause of a
	, , ,	•			
For mod	example, do you expect to finish payin ification to the terms of your mortgage	ng for your car loan within the year or do you expe			ase or decrease because o

# Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 31 of 58

Fill in this inform	nation to identify your	case:			
Debtor 1	Kyle D Post				
Debtor 1	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States Bar	nkruptcy Court for the:	SOUTHERN DISTRIC	CT OF OHIO		
Case number					
(if known)					☐ Check if this is an amended filing
Official Form <b>Declarat</b>		n Individua	al Debtor's S	Schedules	12/15
If two married pe	eople are filing together	, both are equally res	ponsible for supplying o	correct information.	
obtaining money		connection with a ba			ment, concealing property, or 0, or imprisonment for up to 20
Sign	n Below				
Did you pay	y or agree to pay some	one who is NOT an at	torney to help you fill ou	ut bankruptcy forms?	
■ No					
☐ Yes. N	lame of person				cruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	Ity of perjury, I declare true and correct.	that I have read the su	ummary and schedules	filed with this declaratio	n and
X /s/ Kyle	e D Post		X		
Kyle D				e of Debtor 2	

Date

Date **January 22, 2018** 

# Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 32 of 58

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:   Give Details About Your Marital Status and Where You Lived Before							
Debtor 2   Frai Name   Middle Name   Last Name	Fill	l in this inform	ation to identify you	r case:			
Debtor 2   Check if this is an amended filing   First Name   Mobile Name   Last Name   Check if this is an amended filing	De	btor 1		Middle Neme	Lost Nome		
United States Bankruptcy Court for the: SOUTHERN DISTRICT OF OHIO  Case number   Case	De	btor 2	riist name	Middle Name	Last Name		
Case number   Check if this is an amended filling    Official Form 107  Statement of Financial Affairs for Individuals Filling for Bankruptcy  4/16  Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  Not married  2. During the last 3 years, have you lived anywhere other than where you live now?  No  Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Debtor 2 Prior Address: Dates Debtor 2 lived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Visconsin.)  No  Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Geros income (before deductions and exclusions) bonuses, tips  Debtor 2 Sources of income (before deductions and exclusions) bonuses, tips			First Name	Middle Name	Last Name		
Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  4/16  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct normation. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known), Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  No what is your current marital status?  Debtor 1 Prior Address: Dates Debtor 1  Debtor 2 Prior Address: Dates Debtor 2  Bived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Visconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the lotal amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  Debtor 1  Sources of income Check all that apply.  Check all that apply.  Bebtor 1  Sources of income Check all that apply.  Check all that apply.  Bebtor 1  Sources of income (before deductions and exclusions).  Bonuses, tips	Un	ited States Ban	kruptcy Court for the:	SOUTHERN DISTRICT C	OF OHIO		
Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  2	Ca	se number					
Official Form 107  Statement of Financial Affairs for Individuals Filing for Bankruptcy  Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct more read of the process of the proce	(if k	nown)				_	
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.  Part 1: Give Details About Your Marital Status and Where You Lived Before  1. What is your current marital status?  Married  Not married  During the last 3 years, have you lived anywhere other than where you live now?  Debtor 1 Prior Address:  Dates Debtor 1 Debtor 2 Prior Address:  Dates Debtor 1 Ilived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Poebtor 1  Sources of income Check all that apply.  Debtor 2  Sources of income Check all that apply.  Debtor 2  Sources of income Check all that apply.  Debtor 2  Sources of income Check all that apply.  Debtor 2  Sources of income Check all that apply.  Debtor 3  Sources of income Check all that apply.  Debtor 4  Sources of income Check all that apply.  Debtor 4  Sources of income Check all that apply.  Debtor 4  Sources of income Check all that apply.  Debtor 5  Sources of income Check all that apply.  Debtor 6  Debtor 7  Sources of income Check all that apply.  Debtor 9  Sources of income Check all that apply.  Debtor 9  Sources of income Chec							interided filling
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:   Give Details About Your Marital Status and Where You Lived Before	$\sim$ 1	κ: -: - l	107				
Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:   Give Details About Your Marital Status and Where You Lived Before				A ( ( ) ( ) ( ) ( ) ( )			
Information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.    Part 1:   Give Details About Your Marital Status and Where You Lived Before	St	atement	of Financial	Attairs for Individ	duals Filing for B	ankruptcy	4/16
Part 1: Give Details About Your Marital Status and Where You Lived Before    What is your current marital status?   Married   Not married   Not married   Not married   No married   Not							
What is your current marital status?   Married   Not married					uns form. On the top of any	additional pages, write you	ii name and case
What is your current marital status?   Married   Not married	Pa	rt 1 Give D	etails About Your Ma	rital Status and Where You	Lived Before		
Married   Not married	1	<u>-</u>			2.704 201010		
During the last 3 years, have you lived anywhere other than where you live now?  No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 Ilived there  Debtor 2 Prior Address: Dates Debtor 2 Ilived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Debtor 2 Sources of income Check all that apply.  Gross income Check all that apply.  (before deductions and exclusions)  Prom January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips	٠.	wilat is your	Current mantai statu	is:			
During the last 3 years, have you lived anywhere other than where you live now?    No		_					
No Yes. List all of the places you lived in the last 3 years. Do not include where you live now.  Debtor 1 Prior Address: Dates Debtor 1 lived there Debtor 2 Prior Address: Dates Debtor 2 lived there  3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  1. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income Check all that apply.  Gross income Check all that apply.  Wages, commissions, bonuses, tips		■ Not marr	ried				
Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 3    Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income  Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income (before deductions and exclusions)  Part 2  Sources of income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Debtor 3  Wages, commissions, bonuses, tips	2.	During the la	st 3 years, have you	lived anywhere other than	where you live now?		
Debtor 1 Prior Address:  Dates Debtor 1   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 2   Debtor 2 Prior Address:  Dates Debtor 2   Debtor 3    Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington and Wisconsin.)  No  Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2   Explain the Sources of Your Income  Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income (before deductions and exclusions)  Part 2  Sources of income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Debtor 3  Wages, commissions, bonuses, tips		■ No					
lived there		_	all of the places you I	ived in the last 3 years. Do no	ot include where you live now		
No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No Ves. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filled for bankruptcy:  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips		Debtor 1 Pri	or Address:		Debtor 2 Prior Ad	dress:	
No Ves. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No Ves. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filled for bankruptcy:  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips	,	Within the le	ot 9 voors did vou o	vor live with a speuce or les	ual aquivalant in a commun	ity proporty ototo or torritor	2 (Community proporty
Tyes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  \$2,173.56  Wages, commissions, bonuses, tips	<b>s.</b> stat						
Tyes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).  Part 2 Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  \$2,173.56  Wages, commissions, bonuses, tips		<b>-</b> No.					
Explain the Sources of Your Income  4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?  Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No  Yes. Fill in the details.  Debtor 1  Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Wages, commissions, bonuses, tips		_	ke sure vou fill out <i>Sch</i>	nedule H <sup>.</sup> Your Codebtors (Of	ficial Form 106H).		
4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.  No Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  \$2,173.56  Wages, commissions, bonuses, tips			no care you out co.				
Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.  If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.  No  No  Pebtor 1  Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Wages, commissions, bonuses, tips  Pebtor 2  Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$2,173.56  Wages, commissions, bonuses, tips	Pa	rt 2 Explain	the Sources of You	r Income			
Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$2,173.56  Wages, commissions, bonuses, tips	4.	Fill in the total	I amount of income yo	u received from all jobs and a	all businesses, including part-	time activities.	ndar years?
Yes. Fill in the details.  Debtor 1 Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$2,173.56  Wages, commissions, bonuses, tips		П Мо					
Debtor 1 Sources of income Check all that apply.  From January 1 of current year until the date you filed for bankruptcy:  Debtor 2 Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$2,173.56  Wages, commissions, bonuses, tips  \$2,173.56			in the details				
Sources of income Check all that apply.  Gross income (before deductions and exclusions)  From January 1 of current year until the date you filed for bankruptcy:  Sources of income (before deductions and exclusions)  Gross income (before deductions and exclusions)  \$2,173.56  Wages, commissions, bonuses, tips		100.1	in the detaile.				
Check all that apply.  (before deductions and exclusions)  The date you filed for bankruptcy:  Wages, commissions, bonuses, tips  \$2,173.56  Under the date you filed for bankruptcy:							
the date you filed for bankruptcy:  wages, commissions,  bonuses, tips  bonuses, tips					(before deductions and		(before deductions
☐ Operating a business ☐ Operating a business	the date you filed for hankruntcy:				\$2,173.56		
				☐ Operating a business		☐ Operating a business	

Official Form 107

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 33 of 58

		Document Page 33 01 36
Debtor 1	Kyle D Post	Case number (if known)

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of ind Check all that a		Gross income (before deductions and exclusions)
		dar year: December 3	31, 2017 )	■ Wages, commissions, bonuses, tips	\$45,368.50	☐ Wages, con bonuses, tips	nmissions,	
				☐ Operating a business		Operating a	business	
		dar year bef December 3		■ Wages, commissions, bonuses, tips	\$45,401.67	☐ Wages, con bonuses, tips	nmissions,	
				☐ Operating a business		☐ Operating a	business	
an wir	d other prings. In the street each street No	oublic benef f you are fili	it payments;   ng a joint cas ne gross inco	er that income is taxable. Expensions; rental income; intere and you have income that you from each source separa	rest; dividends; money colle you received together, list it	ected from lawsuits; only once under D	; royalties; an ebtor 1.	
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
Part 3:	List	Certain Pa	yments You	Made Before You Filed for	Bankruptcy			
6. Ar		Neither De individual puring the No.	btor 1 nor D rimarily for a 90 days befo Go to line 7 List below e paid that cre not include	ach creditor to whom you pai editor. Do not include paymer payments to an attorney for the	Imer debts. Consumer delad purpose."  d you pay any creditor a told a total of \$6,425* or more its for domestic support oblinis bankruptcy case.	al of \$6,425* or mo	ore? yments and the	he total amount you and alimony. Also, do
_		•	•	on 4/01/19 and every 3 year		n or after the date o	of adjustment	
•	Yes.			r both have primarily consure you filed for bankruptcy, di		al of \$600 or more	?	
		■ No.	Go to line 7					
		☐ Yes	include pay	ach creditor to whom you pai ments for domestic support o this bankruptcy case.				
С	reditor's	s Name and	Address	Dates of payme	nt Total amount	Amount you	Was this p	payment for

Kyle D Post Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. **Insider's Name and Address** Reason for this payment Dates of payment **Total amount** Amount you still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address** Dates of payment **Total amount** Amount you Reason for this payment still owe Include creditor's name paid Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. П No Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number Evergreen Bank Group v Kyle D Collection **Darke County Municipal** □ Pending Post Court □ On appeal 17CVF0011242 504 South Broadway, Suite □ Concluded Greenville, OH 45331 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. ■ No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened **Harley Davidson Financial** 2015 Harley FXDL 1HD1GNM13FC302727 10/2017 \$6,000.00 Attention: Bankruptcy Po Box 22048 Property was repossessed. Carson City, NV 89721 ☐ Property was foreclosed. ☐ Property was garnished. ☐ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken

Case 3:18-bk-30183

Debtor 1

Doc 1

Filed 01/22/18

Document

Page 34 of 58

Entered 01/22/18 14:09:17 Desc Main

ase number (*if known*)

Page 35 of 58 Case number (if known) Document Debtor 1 Kyle D Post 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο Yes. Fill in the details. п Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of Address payment transferred or transfer was Email or website address made Person Who Made the Payment, if Not You **Amourgis & Associates** Attorney Fees: 1400 11/2017-1/201 \$1,791.00 3200 W. Market Street, Suite 106 Filing fee: 310 8 Akron, OH 44333 Credit report: 33 bk\_department@amourgis.com CCC/DEC: 48

Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main

Case 3:18-bk-30183

Doc 1

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Note that Document Page 36 of  $\frac{58}{\text{Case number (if known)}}$ 

Debtor 1 Kyle D Post

17.	Within 1 year before you filed for bankruptcy, di promised to help you deal with your creditors o Do not include any payment or transfer that you list  No Yes. Fill in the details.	r to make payments to your credito		ty to anyone who					
	Person Who Was Paid Address	Description and value of any propertransferred	perty Date payment or transfer was made	Amount of payment					
18.	Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?  Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.  No  Yes. Fill in the details.								
	Person Who Received Transfer Address Person's relationship to you	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made					
19.	Within 10 years before you filed for bankruptcy, beneficiary? (These are often called asset-protect ■ No □ Yes. Fill in the details.		self-settled trust or similar device o	f which you are a					
	Name of trust	Description and value of the prop	perty transferred	Date Transfer was made					
Par	8: List of Certain Financial Accounts, Instru	ments, Safe Deposit Boxes, and Sto	orage Units						
20.	Within 1 year before you filed for bankruptcy, w sold, moved, or transferred? Include checking, savings, money market, or ot houses, pension funds, cooperatives, association No  Yes. Fill in the details.	her financial accounts; certificates	of deposit; shares in banks, credit						
		st 4 digits of Type of accou count number instrument	nt or Date account was closed, sold, moved, or transferred	Last balance before closing or transfer					
21.	Do you now have, or did you have within 1 year cash, or other valuables?  No	before you filed for bankruptcy, an	y safe deposit box or other deposit	ory for securities,					
	Li Yes. Fill in the details.  Name of Financial Institution  Address (Number, Street, City, State and ZIP Code)	Who else had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					
22.	Have you stored property in a storage unit or pl ■ No □ Yes. Fill in the details.	ace other than your home within 1	year before you filed for bankruptc	<b>!</b> ?					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or had access to it? Address (Number, Street, City, State and ZIP Code)	Describe the contents	Do you still have it?					

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Note that Page 37 of 58 Case number (if known)

Debtor 1 Kyle D Post

Pai	t 9: Identify Property You Hold or Control for S	omeone Else								
23.	Do you hold or control any property that someon for someone.	ne else owns? Include any proper	ty yo	ou borrowed from, are storing for	, or hold in trust					
	No									
	Yes. Fill in the details.									
	Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	scribe the property	Value					
Pai	tt 10: Give Details About Environmental Information	tion								
For	the purpose of Part 10, the following definitions a	ipply:								
	Environmental law means any federal, state, or letoxic substances, wastes, or material into the air regulations controlling the cleanup of these substances.	r, land, soil, surface water, ground	_	•						
	Site means any location, facility, or property as of to own, operate, or utilize it, including disposal s	-	law,	whether you now own, operate, o	or utilize it or used					
	Hazardous material means anything an environn hazardous material, pollutant, contaminant, or si		s was	ste, hazardous substance, toxic s	ubstance,					
Rep	ort all notices, releases, and proceedings that yo	u know about, regardless of wher	n the	ey occurred.						
24.	Has any governmental unit notified you that you	may be liable or potentially liable	unc	der or in violation of an environme	ental law?					
	■ No □ Yes. Fill in the details.									
				Environmental law, if you know it	Date of notice					
25.	Have you notified any governmental unit of any release of hazardous material?									
	■ No □ Yes. Fill in the details.									
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	d	Environmental law, if you know it	Date of notice					
26.	Have you been a party in any judicial or administ	trative proceeding under any envi	ironr	mental law? Include settlements a	and orders.					
	■ No □ Yes. Fill in the details.									
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nat	ture of the case	Status of the case					
Pai	t 11: Give Details About Your Business or Conn	ections to Any Business								
27.	Within 4 years before you filed for bankruptcy, d	id vou own a business or have an	າv of	the following connections to any	business?					
	☐ A sole proprietor or self-employed in a tr	•	-	•						
	☐ A member of a limited liability company (	(LLC) or limited liability partnersh	ıip (L	.LP)						
	☐ A partner in a partnership		-							
	☐ An officer, director, or managing executi	ve of a corporation								
	☐ An owner of at least 5% of the voting or €	equity securities of a corporation								

Page 38 of 58 Case number (if known) Document Debtor 1 Kyle D Post No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Kyle D Post Signature of Debtor 2 **Kyle D Post** Signature of Debtor 1 Date January 22, 2018 Date Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? ■ No

. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main

☐ Yes. Name of Person

Case 3:18-bk-30183

Doc 1

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 39 of 58

#### **LBR Form 2016-1(b)**

## UNITED STATES BANKRUPTCY COURT SOUTHERN DISTRICT OF OHIO

In re:		Case No.
Kyle D Post		Chapter 13
	Debtor(s)	Judge

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR AND APPLICATION FOR ALLOWANCE OF FEES IN CHAPTER 13 CASE

#### I. Disclosure

1.	Disclosure		
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. R. Bankr. P. 2016(b), I certify that I at that compensation paid to me within one year before the filing of the petition services rendered or to be rendered on behalf of the debtor(s) in contemplation follows:	n in bankruptcy	, or agreed to be paid to me, for
F	or legal services, I have agreed to accept	\$	3,700.00
P	rior to the filing of this statement I have received	\$	1,400.00
В	alance Due	\$	2,300.00
<ol> <li>3.</li> <li>4.</li> </ol>	\$310.00 of the filing fee has been paid.  The source of the compensation paid to me was:  Debtor Other (specify):  The source of compensation to be paid to me is:		
5.	<ul><li>■ Debtor □ Other (specify):</li><li>■ I have not agreed to share the above-disclosed compensation with any other associates of my law firm.</li></ul>	persons unless t	hey are members and/or
	☐ I have agreed to share the above-disclosed compensation with another perso of my law firm. A copy of the agreement, together with a list of the names of attached.		

#### II. Application

- 6. I hereby apply for an allowance of fees in the amount set forth above. I understand and agree that the Court may approve, without itemization, an allowance of fees not to exceed \$3,700, for rendering the legal services set forth below. If I seek payment of fees in excess of \$3,700, I will file a separate application that sets forth the total amount of the fee requested, and that includes an itemization of all legal services performed, the amount and itemization of any expenses for which reimbursement is sought, the identification and hourly billing rate of any attorney, paralegal, or other professional person for whom fees are sought, and the actual time spend by the attorney, paralegal, or other professional person for whom fees are sought.
  - a. Initial client interview, preparation and signing of any retainer or representation agreement, analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether, and under what chapter, to file a petition in bankruptcy;
  - b. Advising the debtor concerning his or her obligations and duties pursuant to the Code, the Rules, the Local Rules, applicable court orders, and provisions of his or her chapter 13 plan;
  - c. Preparation and filing of any document required by § 521 of the Code, including Official Form 122C-1 and Official Form 122C-2 (if applicable), the petition, schedules, statement of financial affairs and any amendments thereto that may be required;
  - d. Preparation and filing of the chapter 13 plan and any preconfirmation amendments thereto that may be required; provided,

#### Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Page 40 of 58 Document

legal services performed relative to Paragraphs 5.4.1,5.4.2 and 5.4.3 of the chapter 13 plan are not covered by the no-look fee and may be compensated through a separate application for fees; however, in such event, no additional compensation will be allowed for the preparation and filing of a motion pursuant to Rule 5009(d).

- Preparation and filing of payroll orders and amended payroll orders, except amended payroll orders prepared in e. connection with the modification of a plan or the temporary suspension of payments;
- f. Representation of the debtor at the § 341 meeting of creditors and confirmation hearing, and at any adjournments thereof;
- Filing of address changes for the debtor; g.
- Review of claims; h.
- Review of notice of intention to pay claims; i.
- Preparation and filing of objections to non-real estate and non-tax claims, exclusive of any hearings; j.
- Preparation and filing of first motion to suspend or temporarily reduce plan payments; k.
- Representation of the debtor in addressing any routine tax return or tax refund inquiries by the trustee, exclusive of any 1. motion, objection, or hearing;
- Filing of a notice of final cure payment, when filed by the debtor, exclusive of any hearings; m.
- Preparation and filing of debtor's certification regarding issuance of discharge order; n.
- Routine phone calls and questions; o.
- File maintenance and routine case management; and p.
- Any other duty as required by local decision or policy. q.

#### See Rights and Responsibilities

By agreement with the debtor(s), the above-disclosed fee does not include the following services: 7. See Rights and Responsibilities

Janua	rv 22.	2018

Date

/s/ Jessica Goldberger

Jessica Goldberger 0081284

**Amourgis & Associates** 3200 W. Market Street, Suite 106 Akron, OH 44333 330-535-6650 Fax: 330-535-2205

bk department@amourgis.com

0081284 OH

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 41 of 58

Fill in this information to identify your case:							
Debtor 1	Kyle D Post						
Debtor 2 (Spouse, if filing)							
United States B	Bankruptcy Court for the: Southern	District of Ohio					
Case number (if known)							

Check	Check as directed in lines 17 and 21:									
According to the calculations required by this Statement:										
	1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).									
•	2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).									
	3. The commitment period is 3 years.									
	4. The commitment period is 5 years.									

☐ Check if this is an amended filing

### Official Form 122C-1

## **Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

I	Part	1: Calculate Your Average Monthly Income							
	1.	What is your marital and filing status? Check one of	nly.						
		■ Not married. Fill out Column A, lines 2-11.							
		☐ Married. Fill out both Columns A and B, lines 2-11.							
	10 th	ill in the average monthly income that you received from all 01(10A). For example, if you are filing on September 15, the 6- e 6 months, add the income for all 6 months and divide the total courses own the same rental property, put the income from that	month peri al by 6. Fill	od would in the re	l be March 1 thro sult. Do not inclu	ugh Au de any	gust 31. If the amo income amount m	ount of your monthly incom ore than once. For examp	ne varied during le, if both
						Colu. Debt		Column B Debtor 2 or non-filing spouse	
	2.	Your gross wages, salary, tips, bonuses, overtime payroll deductions).	, and cor	nmissio	ons (before all	\$	4,144.11	\$	
	3.	<b>Alimony and maintenance payments.</b> Do not include Column B is filled in.	e paymer	nts from	a spouse if	\$	0.00	\$	
	4.	All amounts from any source which are regularly p of you or your dependents, including child suppor from an unmarried partner, members of your househol and roommates. Do not include payments from a spou you listed on line 3.	<b>t.</b> Include ld, your d	regulai epende	r contributions nts, parents,	\$	0.00	\$	
	5.	Net income from operating a business, profession, or farm	Debtor	1					
		Gross receipts (before all deductions)	\$	0.00					
		Ordinary and necessary operating expenses	-\$	0.00					
		Net monthly income from a business, profession, or fa	rm \$	0.00	Copy here ->	• \$	0.00	\$	
	6.	Net income from rental and other real property	Debtor	1					
		Gross receipts (before all deductions)	\$	0.00					
		Ordinary and necessary operating expenses	-\$	0.00					
		Net monthly income from rental or other real property	\$	0.00	Copy here ->	· \$	0.00	\$	

Official Form 122C-1 Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 42 of 58

**Kyle D Post** Debtor 1 Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 0.00 7. Interest, dividends, and royalties 8. Unemployment compensation 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: For you\_\_\_\_\_ For your spouse 9. Pension or retirement income. Do not include any amount received that was a 0.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 11. Calculate your total average monthly income. Add lines 2 through 10 for 4.144.11 +|\$ 4,144.11 each column. Then add the total for Column A to the total for Column B. Total average monthly income Part 2: **Determine How to Measure Your Deductions from Income** 12. Copy your total average monthly income from line 11. 4,144.11 13. Calculate the marital adjustment. Check one: You are not married. Fill in 0 below. You are married and your spouse is filing with you. Fill in 0 below. You are married and your spouse is not filing with you. Fill in the amount of the income listed in line 11, Column B, that was NOT regularly paid for the household expenses of you or your dependents, such as payment of the spouse's tax liability or the spouse's support of someone other than you or your dependents. Below, specify the basis for excluding this income and the amount of income devoted to each purpose. If necessary, list additional adjustments on a separate page. If this adjustment does not apply, enter 0 below. Total 0.00 0.00 Copy here=> 4,144.11 14. Your current monthly income. Subtract line 13 from line 12. 15. Calculate your current monthly income for the year. Follow these steps: 4,144.11 15a. Copy line 14 here=> Multiply line 15a by 12 (the number of months in a year). **x** 12

15b. The result is your current monthly income for the year for this part of the form.

49,729.32

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 43 of 58

Debt	or 1	Kyle	D Post		Case number (if known)		
16	. Cal	culate	the median family income that applies to	you. Follow these s	teps:		
	16a	. Fill in	the state in which you live.	ОН	_		
	16b	. Fill in	the number of people in your household.	1			
		To fin	the median family income for your state and a list of applicable median income amount actions for this form. This list may also be available.	s, go online using th		\$_	47,582.00
17		_	ne lines compare?	On the ten of news	l at this farms already have 4. Discocable		t ala ta masina a al con ala m
	17a	. ⊔	Line 15b is less than or equal to line 16c. (11 U.S.C. § 1325(b)(3). <b>Go to Part 3.</b> Do N				
	17b	. •	Line 15b is more than line 16c. On the top 1325(b)(3). <b>Go to Part 3 and fill out Calc</b> your current monthly income from line 14 a	ulation of Your Dis			
Par	t 3:	Cal	culate Your Commitment Period Under 11	U.S.C. § 1325(b)(4	)		
18.	Cop	y you	r total average monthly income from line	i1.		\$	4,144.11
19.	conf	tend th	e marital adjustment if it applies. If you are at calculating the commitment period under anome, copy the amount from line 13.	married, your spound married,	use is not filing with you, and you  (4) allows you to deduct part of your		
	•		marital adjustment does not apply, fill in 0 on	ı line 19a.		-\$	0.00
	19b	. Subt	ract line 19a from line 18.			\$_	4,144.11
20.	Cal	culate	your current monthly income for the year	. Follow these step	s:		
	20a	. Сору	line 19b			\$_	4,144.11
		Multip	oly by 12 (the number of months in a year).				<b>x</b> 12
	20b	. The r	esult is your current monthly income for the y	ear for this part of t	he form	\$_	49,729.32
	20c	. Сору	the median family income for your state and	size of household f	rom line 16c	\$_	47,582.00
	21.	How	do the lines compare?			L	
			Line 20b is less than line 20c. Unless otherw period is 3 years. Go to Part 4.	ise ordered by the c	court, on the top of page 1 of this form,	check box 3,	The commitment
			Line 20b is more than or equal to line 20c. Un commitment period is 5 years. Go to Part 4.	nless otherwise orde	ered by the court, on the top of page 1	of this form, o	check box 4, The
Par	t 4:	_	n Below	the Seferment's and t	his arata a anta a disa a a anta di anta a di a		
	ву ѕ	signing	here, under penalty of perjury I declare that	the information on t	nis statement and in any attachments i	s true and col	rrect.
)		′ Kyle ∕le D∃	D Post				
			e of Debtor 1				
	Date		nuary 22, 2018				
	If vo		/ DD / YYYY  cked 17a, do NOT fill out or file Form 122C-2				
	, -		· · · · · · · · · · · · · · · · · · ·				

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 44 of 58

Fill in	this info	rmation t	o ider	tify yo	ur case:															
Debto	r 1	Kyle D I	Post																	
Dahta	. 0																			
Debto	r 2 se, if filind	7)																		
(Opou.	3C, 11 111111	9)																		
United	States B	Bankruptcy	Court	for the:	South	ern Distr	rict of C	Ohio												
	number													Shool	if thin	io or		dad fil	lina	
(if kno	wn)													Jnecr	CII UIIS	is ai	amen	aea III	ing	
Officia	l Form 12	22C-2																		
Cha	pter	13 Ca	lcu	latio	n of	You	r Dis	spos	sabl	e In	con	ne								04/16
		orm, you eriod (Offi				eted co <sub>l</sub>	py of <i>C</i>	Chapter	· 13 Sta	temer	nt of Yo	our Cui	rent Mo	onthly	Incom	e and	l Calcul	ation (	of	
space	is neede	e and accu d, attach a es, write y	a sepa	rate sh	neet to th	nis form,	, Includ	de the li												ore
Part 1	Cal	lculate Yo	ur De	duction	ıs from \	our Inc	ome													
the info	question rmation	Revenue ns in lines may also	6-15. be av	To find ailable	the IRS at the ba	standa ankrupto	rds, go cy cleri	online k's offic	using ce.	the lir	nk spe	cified i	n the se	parat	e instru	uctior	ns for th	nis fori	m. Th	is
ехр	enses if t	hey are hig I do not de	gher th	an the	standard	s. Do no	t includ	de any d	peratin	ig expe	enses t	that you	subtrac	ted fro	om inco					
If yo	ur expen	ses differ	from n	onth to	month, e	enter the	e averaç	ge expe	ense.											
Note	e: Line nu	umbers 1-4	4 are n	ot used	in this fo	orm. The	se num	nbers ap	oply to i	informa	ation re	equired	by a sim	ilar fo	rm use	d in cl	napter 7	cases	j.	
5.	The nu	mber of p	eople	used ir	ı determ	ining yo	our ded	duction	s from	incom	ne									
	plus the	e number number on nber of pec	of any a	addition	al depen	dents wh										1				
Nat	ional Sta	ındards		You m	nust use t	the IRS I	Nationa	al Stand	lards to	answe	er the c	questior	s in line	s 6-7.						
6.		<b>clothing, a</b> rds, fill in th								ntered	in line (	5 and th	ne IRS N	lationa	al		\$		639	9.00
7.	the dollar	pocket he ar amount who are 65 han this IR	for ou	-of-poc derbed	ket healt cause old	h care. T ler peopl	Γhe nun le have	mber of a higher	people er IRS a	is spli allowar	t into tv nce for	vo cate	goriesp	eople	who ar	re und	der 65 aı	nd		

Official Form 22C-2

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main

Document Page 45 of 58 Kyle D Post Debtor 1 Case number (if known) People who are under 65 years of age 7a. Out-of-pocket health care allowance per person 7b. Number of people who are under 65 1 7c. Subtotal. Multiply line 7a by line 7b. 49.00 Copy here=> \$ 49.00 People who are 65 years of age or older 7d. Out-of-pocket health care allowance per person 117 7e. Number of people who are 65 or older 0 0.00 7f. Subtotal. Multiply line 7d by line 7e. 0.00 Copy here=> 7g. Total. Add line 7c and line 7f 49.00 49.00 Copy total here=> Local Standards You must use the IRS Local Standards to answer the guestions in lines 8-15. Based on information from the IRS, the U.S. Trustee Program has divided the IRS Local Standard for housing for bankruptcy purposes into two parts: Housing and utilities - Insurance and operating expenses Housing and utilities - Mortgage or rent expenses To answer the questions in lines 8-9, use the U.S. Trustee Program chart. To find the chart, go online using the link specified in the separate instructions for this form. This chart may also be available at the bankruptcy clerk's office. Housing and utilities - Insurance and operating expenses: Using the number of people you entered in line 5, fill 464.00 in the dollar amount listed for your county for insurance and operating expenses. Housing and utilities - Mortgage or rent expenses: 9a. Using the number of people you entered in line 5, fill in the dollar amount 667.00 listed for your county for mortgage or rent expenses. 9b. Total average monthly payment for all mortgages and other debts secured by your home. To calculate the total average monthly payment, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Next divide by 60. Name of the creditor Average monthly payment Caliber Home Loans, In 589.09 Copy Repeat this amount 589.09 589.09 9b. Total average monthly payment here=> on line 33a. 9c. Net mortgage or rent expense.

Subtract line 9b (total average monthly payment) from line 9a (mortgage or rent expense). If this number is less than \$0, enter \$0.

Copy 77.91 77.91 here=>

10. If you claim that the U.S. Trustee Program's division of the IRS Local Standard for housing is incorrect and affects the calculation of your monthly expenses, fill in any additional amount you claim.

0.00

Explain why:

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 46 of 58

**Kyle D Post** Debtor 1 Case number (if known) 11. Local transportation expenses: Check the number of vehicles for which you claim an ownership or operating expense. ☐ 0. Go to line 14. 1. Go to line 12. 2 or more. Go to line 12. 12. Vehicle operation expense: Using the IRS Local Standards and the number of vehicles for which you claim the 203.00 operating expenses, fill in the Operating Costs that apply for your Census region or metropolitan statistical area. 13. Vehicle ownership or lease expense: Using the IRS Local Standards, calculate the net ownership or lease expense for each vehicle below. You may not claim the expense if you do not make any loan or lease payments on the vehicle. In addition, you may not claim the expense for more than two vehicles. **Describe Vehicle 1:** Vehicle 1 2010 Ford F150 110000 miles Supercab XL 13a. Ownership or leasing costs using IRS Local Standard..... 485.00 13b. Average monthly payment for all debts secured by Vehicle 1. Do not include costs for leased vehicles. To calculate the average monthly payment here and on line 13e, add all amounts that are contractually due to each secured creditor in the 60 months after you file for bankruptcy. Then divide by 60. Name of each creditor for Vehicle 1 Average monthly payment **Greenvil Ntl** 400.08 Repeat this Copy amount on line 33b. **Total Average Monthly Payment** 400.08 400.08 Copy net Vehicle 1 13c. Net Vehicle 1 ownership or lease expense Subtract line 13b from line 13a. if this number is less than \$0, enter \$0. ..... expense here 84.92 84.92 Vehicle 2 Describe Vehicle 2: 13d. Ownership or leasing costs using IRS Local Standard..... 0.00 13e. Average monthly payment for all debts secured by Vehicle 2. Do not include costs for leased vehicles. Name of each creditor for Vehicle 2 Average monthly payment \$ Copy Repeat this here amount on line Total average monthly payment 0.00 Copy net 13f. Net Vehicle 2 ownership or lease expense Vehicle 2 Subtract line 13e from line 13d. if this number is less than \$0, enter \$0. ..... expense here 0.00 0.00 14. Public transportation expense: If you claimed 0 vehicles in line 11, using the IRS Local Standards, fill in the 0.00 Public Transportation expense allowance regardless of whether you use public transportation. 15. Additional public transportation expense: If you claimed 1 or more vehicles in line 11 and if you claim that you may also deduct a public transportation expense, you may fill in what you believe is the appropriate expense, but you may 0.00 not claim more than the IRS Local Standard for Public Transportation.

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 47 of 58

Debtor 1 Kyle D Post Case number (if known)

		In addition to the expense d the following IRS categories		s listed above	, you are allowed your monthly expenses	for	
16.	self-employment taxes, soci	al security taxes, and Medic wever, if you expect to rece om the total monthly amount	are taxes ive a tax	. You may inc refund, you m	d local taxes, such as income taxes, clude the monthly amount withheld from just divide the expected refund by 12 for taxes.	\$	1,153.37
17.	Involuntary deductions: To contributions, union dues, a	, , ,	uctions th	at your job re	quires, such as retirement		
	Do not include amounts that	are not required by your job	o, such as	s voluntary 40	1(k) contributions or payroll savings.	\$	0.00
18.	filing together, include paym	ents that you make for your life insurance on your depe	spouse's	term life insu	e insurance. If two married people are rance. spouse's life insurance, or for any form	\$	0.00
19.	<b>Court-ordered payments:</b> administrative agency, such Do not include payments on	by the order of a court or  You will list these obligations in line 35.	\$	508.69			
20.							
	as a condition for your jo	b, or					
	for your physically or me	\$	0.00				
21.	<b>Childcare:</b> The total monthl Do not include payments for	sitting, daycare, nursery, and preschool.	\$	0.00			
22.	Additional health care exp that is required for the health by a health savings account	•	0.00				
	Payments for health insuran	\$	0.00				
23.	Optional telephone and te for you and your dependent phone service, to the extent income, if it is not reimburse Do not include payments for expenses, such as those re						
		orted on line of or omolar r	orm 1220	-1, or any am	ount you previously deducted.	+\$	0.00
24.	Add all of the expenses al Add lines 6 through 23.			,	ount you previously deducted.	<b>+</b> \$ [\$	3,179.89
	Add all of the expenses al	lowed under the IRS expe	nse allov	vances.	ne Means Test.		
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit	Iowed under the IRS expenses  These are additional de Note: Do not include any insurance, and health sa	nse alloved additions and expensions are allowed as the contractions are allowed as the contra	vances.  allowed by the se allowances account expen	ne Means Test.	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deductions Health insurance, disabilit insurance, disability insuran	Iowed under the IRS expenses  These are additional de Note: Do not include any insurance, and health sa	nse alloved additions and expensions are allowed as the contractions are allowed as the contra	vances.  allowed by the se allowances account expen	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health	\$	
Add	Add all of the expenses al Add lines 6 through 23. ditional Expense Deductions Health insurance, disability insurance, disability insuran your dependents.	Iowed under the IRS expenses  These are additional de Note: Do not include any insurance, and health sa	eductions ny expen- avings acunts that	vances.  allowed by the seallowances allowances account expensive reasonab	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health	\$	
Add	Add all of the expenses al Add lines 6 through 23. litional Expense Deduction: Health insurance, disabilit insurance, disability insuran your dependents. Health insurance	S These are additional do Note: Do not include an y insurance, and health sace, and health sace, and health savings acco	eductions ny expen- avings ac unts that	vances.  allowed by the seallowances allowances account expensare reasonab	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health	\$	
Add	Add all of the expenses al Add lines 6 through 23. ditional Expense Deduction: Health insurance, disabilit insurance, disability insuran your dependents. Health insurance Disability insurance	S These are additional do Note: Do not include an y insurance, and health sace, and health sace, and health savings acco	eductions ny expen- avings ac unts that	vances. sallowed by the seallowances count expension are reasonab  55.38  0.00	ne Means Test. s listed in lines 6-24. sess. The monthly expenses for health	\$	
Add	Add all of the expenses al Add lines 6 through 23. ditional Expense Deduction:  Health insurance, disabilitinsurance, disability insurancy your dependents.  Health insurance  Disability insurance  Health savings account	These are additional de Note: Do not include as y insurance, and health sace, and health sace, and health savings acco	eductions ny expen- avings ac unts that  \$	vances.  a allowed by the se allowances are reasonabee 55.38  0.00  0.00	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, o	\$r	3,179.89
Add	Add all of the expenses al Add lines 6 through 23.  ditional Expense Deductions  Health insurance, disability insurance, disability insurancy our dependents.  Health insurance  Disability insurance  Health savings account  Total	These are additional do Note: Do not include at y insurance, and health sace, and health sace, and health savings acco	eductions ny expen- avings ac unts that	vances.  a allowed by the se allowances are reasonabee 55.38  0.00  0.00	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, o	\$r	3,179.89
Add	Add all of the expenses al Add lines 6 through 23.  ditional Expense Deductions  Health insurance, disability insurance, disability insurancy dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to	These are additional do Note: Do not include at y insurance, and health sace, and health sace, and health savings acco	eductions ny expen- avings ac unts that  \$	vances.  a allowed by the se allowances are reasonabee 55.38  0.00  0.00	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, o	\$r	3,179.89
Add	Add all of the expenses al Add lines 6 through 23.  litional Expense Deductions:  Health insurance, disabilitinsurance, disability insurancy our dependents.  Health insurance Disability insurance Health savings account  Total  Do you actually spend this to No. How much do you yes  Continued contributions to continue to pay for the reason	These are additional de Note: Do not include at y insurance, and health sace, and health sace, and health savings accordant amount? Ou actually spend?	eductions ny expen- avings ac unts that  \$ \$ \$  family n and suppo	vances.  a allowed by the se allowances are reasonabes.  55.38  0.00  0.00  55.38  enembers. The ort of an elder le to pay for s	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, o  Copy total here=>  e actual monthly expenses that you will rely, chronically ill, or disabled member of uch expenses. These expenses may	\$r	3,179.89
25. 26.	Add all of the expenses al Add lines 6 through 23.   Iitional Expense Deductions  Health insurance, disability insurance, disability insurancy dependents.  Health insurance  Disability insurance  Health savings account  Total  Do you actually spend this to No. How much do you yes  Continued contributions to continue to pay for the reason your household or member include contributions to an all Protection against family or second in the same and the same an	These are additional de Note: Do not include at y insurance, and health sace, and health sace, and health savings accordant amount? Ou actually spend?  The care of household or onable and necessary care a for your immediate family who count of a qualified ABLE priolence. The reasonably necessary care.	eductions ny expen- avings ac unts that  \$ \$ \$  family n and suppo o is unab program. eccessary	se allowed by the se allowances are reasonable 55.38 0.00 0.00 55.38 0.00 0.00 0.00 0.00 0.00 0.00 0.00 0	ne Means Test. Is listed in lines 6-24. Ises. The monthly expenses for health ly necessary for yourself, your spouse, o  Copy total here=>  e actual monthly expenses that you will rely, chronically ill, or disabled member of uch expenses. These expenses may	\$r	3,179.89

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 48 of 58

	Kyle D Post						
	Additional home energy costs. Your hom line 8.	ne energy costs are included in your insurance and op	erating ex	penses o	n		
	If you believe that you have home energy on 8, then fill in the excess amount of home er	costs that are more than the home energy costs including costs	ed in expe	enses on l	ine		
	You must give your case trustee document amount claimed is reasonable and necessa	ation of your actual expenses, and you must show tha ary.	at the addi	tional		\$	0.0
		dren who are younger than 18. The monthly expense pendent children who are younger than 18 years old			or		
	You must give your case trustee document claimed is reasonable and necessary and r	ation of your actual expenses, and you must explain whot already accounted for in lines 6-23.	vhy the ar	nount			
	* Subject to adjustment on 4/01/19, and eve	ery 3 years after that for cases begun on or after the c	late of adj	ustment.		\$	0.0
		he monthly amount by which your actual food and clog allowances in the IRS National Standards. That amos in the IRS National Standards.					
		ional allowance, go online using the link specified in to so be available at the bankruptcy clerk's office.	he separa	te			
	You must show that the additional amount	claimed is reasonable and necessary.				\$	0.0
	Continuing charitable contributions. The amount that you will continue to contribute in the form of cash or financial instruments to a religious or charitable organization. 11 U.S.C. § 548(d)(3) and (4).						
	Do not include any amount more than 15%	of your gross monthly income.				\$	0.0
	Add all of the additional expense deduct Add lines 25 through 31.	tions.			!	\$	55.38
Dedu	ictions for Debt Payment						
	or debts that are secured by an interest pans, and other secured debt, fill in lines	in property that you own, including home mortga	ges, vehic	ele			
	o calculate the total average monthly paym reditor in the 60 months after you file for ba	ent, add all amounts that are contractually due to eac nkruptcy. Then divide by 60.	h secured				
	Mortgages on your home						
220						verage ayment	monthly t
ssa.	Copy line 9b here			=>	pa		
ssa.	Copy line 9b here  Loans on your first two vehicles			=>	pa		t
	Loans on your first two vehicles				\$		t
33b.	Loans on your first two vehicles Copy line 13b here				\$		589.09
33b. 33c.	Loans on your first two vehicles Copy line 13b here Copy line 13e here			=>	\$		589.09
33b. 33c. 33d.	Loans on your first two vehicles Copy line 13b here		Does	=>	\$		589.09
33b. 33c. 33d.	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:		Does include or ins	=> payment le taxes	\$		589.09
33b. 33c. 33d.	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt		Does include or ins	=> payment de taxes urance?	\$ \$ \$ \$		589.09
33b. 33c. 33d.	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts:		Does include or ins	=> payment le taxes urance?	\$		589.09
33b. 33c. 33d.	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt		Does include or ins	=> payment de taxes urance?	\$ \$ \$ \$		589.09
33b. 33c. 33d.	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt		Does include or ins	=> payment de taxes urance? No Yes	\$ \$ \$ \$		589.09
33b. 33c. 33d.	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt		Does include or ins	payment de taxes urance? No Yes No Yes	\$ \$ \$ \$ \$		589.09
33b. 33c. 33d.	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt		Does include or ins	payment le taxes urance? No Yes No Yes	\$ \$ \$ \$ \$ \$		589.09
33a. 33b. 33c. 33d. Name	Loans on your first two vehicles Copy line 13b here Copy line 13e here List other secured debts: e of each creditor for other secured debt		Does include or ins	payment de taxes urance? No Yes No Yes	\$ \$ \$ \$ \$		589.09

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 49 of 58

**Kyle D Post** Debtor 1 Case number (if known) 34. Are any debts that you listed in line 33 secured by your primary residence, a vehicle, or other property necessary for your support or the support of your dependents? No. Go to line 35. ☐ Yes. State any amount that you must pay to a creditor, in addition to the payments listed in line 33, to keep possession of your property (called the cure amount). Next, divide by 60 and fill in the information below. Name of the creditor Identify property that secures the debt **Total cure amount** Monthly cure amount  $\div 60 = \$$ -NONE-Copy total 0.00 0.00 Total here=> 35. Do you owe any priority claims - such as a priority tax, child support, or alimony - that are past due as of the filing date of your bankruptcy case? 11 U.S.C. § 507. No. Go to line 36. ☐ Yes. Fill in the total amount of all of these priority claims. Do not include current or ongoing priority claims, such as those you listed in line 19. Total amount of all past-due priority claims 0.00 ÷60 \$ 0.00 36. Projected monthly Chapter 13 plan payment 500.00 Current multiplier for your district as stated on the list issued by the Administrative Office of the United States Courts (for districts in Alabama and North Carolina) or by 6.50 the Executive Office for United States Trustees (for all other districts). To find a list of district multipliers that includes your district, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. Copy total 32.50 32.50 here=> Average monthly administrative expense 1,021.67 37. Add all of the deductions for debt payment. Add lines 33e through 36. **Total Deductions from Income** 38. Add all of the allowed deductions. Copy line 24, All of the expenses allowed under IRS 3,179.89 expense allowances Copy line 32, All of the additional expense deductions 55.38 Copy line 37, All of the deductions for debt payment 1,021.67 4,256.94 4,256.94 Total deductions..... Copy total here=>

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 50 of 58

Debtor 1	Kyle	D Post			Case	num	ber (if known)				
Part 2	: De	termine You	r Disposable Income Under 11 U.S.C. § 13	25(b)	(2)						
39.			ent monthly income from line 14 of Form current Monthly Income and Calculation o					\$	4,144.11		
	children disability received	The monthly payments for in accordance	y necessary income you receive for supp y average of any child support payments, fos r a dependent child, reported in Part I of For the with applicable nonbankruptcy law to the ended for such child.	iter ca n 122	r care payments, or 122C-1, that you			.00_			
	employe in 11 U.S	r withheld fro S.C. § 541(b)(	tirement deductions. The monthly total of a m wages as contributions for qualified retirer (7) plus all required repayments of loans from § 362(b)(19).	nent p	lans, as specified	\$	0.00				
42.	Total of	all deduction	ns allowed under 11 U.S.C. § 707(b)(2)(A).	Сору	line 38 here=>	\$	4,256	.94			
	expense their exp	s and you ha	al circumstances. If special circumstances j we no reasonable alternative, describe the sp nust give your case trustee a detailed explan ocumentation for the expenses.	ecial	circumstances and						
Des	cribe th	e special cir	cumstances		Amount of expen	ıse					
				\$	S						
				— \$	 S		-				
				·			-				
						1	-				
			Total	\$	0.00	Co he	py re=> \$	0.00			
44.	Total ad	ljustments. A	add lines 40 through 43.		=> \$		4,256.94	Copy here=> -\$	4,256.94		
45.	Calculat	te your mont	hly disposable income under § 1325(b)(2)	. Subt	tract line 44 from lin	ne 3	9.	\$	-112.83		
Part 3	: Ch	ange in Inco	me or Expenses								
	have cha time you you filed	anged or are y r case will be your petition,	r expenses. If the income in Form 122C-1 o virtually certain to change after the date you open, fill in the information below. For exam, check 122C-1 in the first column, enter line n when the increase occurred, and fill in the	filed y ple, if 2 in th	our bankruptcy peti the wages reported ne second column, of	ition d inc	and during the creased after				
Fori	n	Line	Reason for change		Date of change		Increase or decrease?	Amount of	change		
	22C-1 22C-2 22C-1 22C-2 22C-1 22C-2 22C-1					_	☐ Increase ☐ Decrease ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Increase ☐ Decrease ☐ Increase ☐ Increase ☐ Increase ☐ Increase	\$ \$ \$			

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 51 of 58

Debtor 1	Kyle D Post	Case number (if known)	
Part 4:	Sign Below		
E	By signing here, under penalty of perjury you declare that the inform	ation on this statement and in any attachments is true and correct.	
-	/s/ Kyle D Post Kyle D Post Signature of Debtor 1		
	January 22, 2018 MM / DD / YYYY		

Case 3:18-bk-30183 Doc 1 Filed 01/22/18 Entered 01/22/18 14:09:17 Desc Main Document Page 52 of 58

Debtor 1 Kyle D Post Case number (if known)

#### **Current Monthly Income Details for the Debtor**

**Debtor Income Details:** 

Income for the Period 07/01/2017 to 12/31/2017.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: Dynamic Weld

Year-to-Date Income:

Starting Year-to-Date Income: \$\frac{\\$20,\\$503.85}{\$\$\$ from check dated \$\frac{6/30/2017}{\$\$\$ 12/31/2017}.

Income for six-month period (Ending-Starting): \$24,864.65 .

Average Monthly Income: \$4,144.11.

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
+ \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

## Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: <a href="http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure">http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure</a>.

#### Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

#### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: <a href="http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit">http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit</a> AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Caliber Home Loans, In 13801 Wireless Way Oklahoma City, OK 73134

Evergreen Bank Group 1776 Lincoln St Ste 900 Denver, CO 80203

Freedom Road Financial 10509 Professional Cir S Reno, NV 89521

Greenvll Ntl Po Box 190 Greenville, OH 45331

Harley Davidson Financial Attention: Bankruptcy Po Box 22048 Carson City, NV 89721

Jessica Jenkins 103 Dwyer Ave Greenville, OH 45331

Midwest America Fed Cu 1104 Medical Park Dr Fort Wayne, IN 46825

Ohio Child Support Payment Central PO Box 182372 Columbus, OH 43218-2372

Recovery and Wellness Centers of Midwest 600 Walnut St Greenville, OH 45331

Rick L Sprunger 1540 Shady Oak Dr Berne, IN 46711

Synchrony Bank/Lowes Attn: Bankruptcy Po Box 965060 Orlando, FL 32896

Teresa Post 504 Winbigler Street Ansonia, OH 45303

Tricia N. McKinnon, Esq. P.O. Box 5016 Rochester, MI 48308

US Bank/Rms CC Card Member Services Po Box 108 St Louis, MO 63166